

# LESSONS FROM THE TSUNAMI: TOP LINE FINDINGS

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## TABLE OF CONTENTS

<b>EXECUTIVE SUMMARY</b>	<b>2</b>
<b>FINDINGS</b>	<b>3</b>
<b>RECOMMENDATIONS</b>	<b>5</b>
<b>APPENDIX</b>	<b>7</b>

This research was conducted by Fritz Institute in India and Sri Lanka utilizing a professional social science research and survey firm. The research project was supervised by Dr. Anisya Thomas, Managing Director, Fritz Institute and Dr. Vimala Ramalingam, the former Secretary General of the Indian Red Cross.

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## EXECUTIVE SUMMARY

On the 26th of December 2004, India and Sri Lanka suffered one of their worst natural calamities. A massive 9.0 magnitude earthquake hit Indonesia off the west coast of Northern Sumatra at 6:29 a.m. (IST) followed by a second earthquake 81 km west of Pulo Kunji, Great Nicobar three hours later. The earthquakes triggered giant tidal waves, which hit 2,260 km of Indian coastline along the southeast coast and more than 1000 km along the north, east and southern coasts of Sri Lanka, causing colossal damage. The current estimates suggest that more than 31,000 people were killed in Sri Lanka and approximately 11,000 people were killed in India. More than two million people were affected by this disaster in the two countries, with the number displaced hovering at about 1 million.

The reactions to the Tsunami were vastly different in each country. The Indian government declined international assistance for relief operations, declaring that sufficient resources were available in the country to assist those made vulnerable. A significant amount of the coordination and actual relief effort was done by the government. In Sri Lanka, the government was initially slow to respond and international, regional and local NGOs were given relatively free access to Tsunami affected areas (except in the politically sensitive northern and eastern provinces). In both countries, the government (central, state and district levels), local NGOs, international NGOs already operating within the country, the private sector and religious groups all set relief processes in motion.

In an effort to understand the dynamics of the relief operation and gather data to inform future relief efforts, Fritz Institute conducted a study of NGOs<sup>1</sup> and affected families in all the districts affected by the Tsunami in India and Sri Lanka. This report outlines the top line findings of the study. The NGO portion of the study included interviews with the relief coordinators of 226 NGOs in India and 150 NGOs in Sri Lanka. The affected families' component included 802 interviews from 100 villages in India and 604 interviews from 97 villages in Sri Lanka. Both quantitative and qualitative methodologies were used. All the interviews were conducted in March-April 2005 by trained, native, bilingual investigators using English and/or the local languages, as appropriate.

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<sup>1</sup> Includes local NGOs, international NGOs, the Red Cross, and the UN organizations involved in the relief effort.

Despite vastly different political and economic scenarios, many commonalities existed in both countries, suggesting that rescue and relief activities are relatively similar across contexts.

### **1. The Majority of Rescue and Relief Actors are Local**

Eighty-six percent of the affected families surveyed in India said that they received help from the government in the first 48 hours, 59% from medical groups and hospitals, 54% from religious groups and 40% said that their help came from NGOs and the private sector. In Sri Lanka, 39% reported receiving rescue services from the army, navy and coast guard, but 61% said that they received no assistance at all in the first 48 hours. Twenty-three percent had received assistance from some medical organizations, 20% from religious leaders, 14% from international NGOs, 12% from local NGOs, and only 4% from the government (see Tables 1 and 2). "Where was the government when all this happened?" lamented one survivor.

### **2. The Voice of the Affected is an Important Indication of Relief Effectiveness**

During the Tsunami and in the wake of US Hurricane Katrina, one question raised is how effective relief can be measured. Without benchmarks of what constitutes an "effective" relief operation, those affected become an important source to gauge the success of the relief providers. In India and Sri Lanka, the affected people had clear opinions about the aid providers and their satisfaction with the content and process of aid distribution. Overall, more than 60% of the people in India and Sri Lanka reported that the aid that they received in the first 60 days was timely and that they were treated with dignity. However, these numbers varied widely by district and village and it was clear that in some areas people had been significantly underserved. It is also interesting to note that there was considerable variation in the perceptions of timeliness and respect for dignity. In general, it was perceived that the medical professionals were most respectful of the affected populations, as they were perceived to be fair and had an established process for prioritizing needs and providing services. People in India also expressed humiliation at having to receive charity, especially in the form of used clothes, which did not always meet local cultural norms (see Table 3).

### **3. Lack of Logistical Capacity Created Critical Bottlenecks and the Perception of 'Dumping'**

In both India and Sri Lanka, aid agencies reported low capacity for warehousing and transportation. In India, 60% of responding NGOs did not have adequate warehouse facilities and although adequate relief supplies were received, 40% of organizations lacked transport to carry relief supplies to the affected population. In Sri Lanka the numbers were very similar, with 58% of those surveyed reporting inadequate warehouse facilities and 52% inadequate transport capacity (see Table 4).

Widespread media coverage prompted the donation of inappropriate goods. More than 60% of NGOs in Sri Lanka and 40% of NGOs in India reported that the receipt of unsolicited supplies had been high. The flood of unsolicited supplies, such as used clothing, in conjunction with the lack of warehousing and transportation capacity, forced immediate distribution, leaving the affected families with

the feeling of materials being dumped. "They came in trucks and gave, in excess, all old and used clothes," complained one beneficiary. "We didn't take much, they were (piled up) on the road."

#### **4. Significant Collaboration Existed Between Agencies**

The respondents in both countries observed that NGOs collaborated well with each other. In India, 70% of the participating agencies indicated that they had collaborated in some way with another agency, and in Sri Lanka this number was much higher at 85%. Most collaborations involved national or international organizations working with local community-based organizations. In India, 45% of the NGOs said that they worked with local NGOs and 11% with international NGOs. In Sri Lanka, 41% said that they worked with local NGOs and 27% with international NGOs. Overall, approximately 33% of NGOs in both countries reported that they received some funding from the international community (see Table 8). In India, 36% of NGOs said that they collaborated with the government, and in Sri Lanka this number was 28% (see Table 5).

#### **5. Limited Role of Business**

Although the private sector had a high profile in the relief effort in both countries with volunteers facilitating aid distribution, only 8% of NGOs in India and 12% of NGOs in Sri Lanka reported working with the private sector. Those who had worked with the private sector reported that their experiences had been positive. The collaborations with business included funding for relief operations, volunteers to distribute food and clothing and remove debris, transportation for people affected, and delivery of relief supplies.

However, when beneficiaries were asked to rank the organizations that had provided them with various forms of relief, the government and the private sector seemed to be the two most common responses in India (see Table 7). This is perhaps explainable by the fact that companies like Coca-Cola were very visible distributing water in collaboration with the Red Cross, and others like Tata had mobilized their own relief services to provide food, water and shelter to thousands of people. Also, many private hospitals and medical service institutions also provided services to those affected in their communities. In Sri Lanka the private sector was less visible, and local and international NGOs were attributed with the bulk of the relief effort.

#### **6. Coordinating Role of Government is Critical**

A significant difference between India and Sri Lanka in the Tsunami relief effort was the role of government. In India, where the government played a critical role in coordinating the rescue and relief efforts, the affected families reported satisfaction with the visible and tireless district level administrators who provided and coordinated relief. In fact, the government was ranked as the number one provider of aid by the affected people on all the major dimensions of relief services.

Among the NGOs, more than 85% in India stated that the role of the government in coordinating the relief had been helpful. In Sri Lanka, the absence of the government, especially in the first 48 hours, was noticed by those affected and by those responding. Overall, only 48% of the NGOs in Sri Lanka said that the role of the government was helpful and 27% reported that it was not helpful at all.

### **1. Local Capacity and Preparedness is Key to Effective Relief**

One of the lessons from the Tsunami is that most relief is local and that local capacity and preparedness are key to effective relief. In preparing for future disasters, it is critical that there be (a) an accurate assessment of the local capacity to handle disasters, and (b) collaboration among the various stakeholders in creating a plan to respond to disasters. Local governments, NGOs, the business community and the local community in areas vulnerable to disasters each have different perspectives and priorities with regard to disaster mitigation and relief. Systematically evaluating and integrating these is likely to create a more nuanced and appropriate plan. Further, since each of these stakeholders must have their own plans, common protocols about communications hubs, points of command and control and information dissemination are likely to provide a much more robust and coordinated relief effort. In a related survey of corporations that participated in the relief effort in India, a number of respondents suggested that it would be important to document lessons learned in order to prioritize needs for future efforts. As one respondent observed "All are thinking of material supply like food, water and clothes, but what was necessary was sanitation."

### **2. Those Affected Must Have a Voice in the Relief Plan**

Another key lesson learned is that those most affected by disasters must be consulted about their priorities and preferences about the type of assistance that is most needed. Often community leaders are most familiar with the needs of their communities, and incorporating these into relief plans can ensure that the help is targeted and appropriate. During the Tsunami, the rush to help in any way possible resulted in mountains of used clothing and inadequate medical help. Also, where central points of communication and disaster protocols had been established in the community, the loss of life was significantly less.

Consulting local communities before a disaster, during the assessment phase, and in the relief phase will ensure that those made vulnerable have a voice in describing their needs. In those communities where relief agencies were able to perform consultations with the local communities during the assessment phase, the damage estimates tended to be more comprehensive and accurate.

### **3. Governments Must Play a Key Role in Coordination of Relief**

Disasters are chaotic by definition and require coordination of the various actors to avoid duplication of effort and ensure that the most critical assistance is provided to those who most need it. The influx of various actors in a disaster situation can cause confusion, bottlenecks, shortages and competition. It is critical that very clear roles are assigned to local, state and federal authorities with clear criteria of when each is needed to augment the services and resources provided by the other. In India - where the relief efforts of the government were praised by the affected families, NGOs and the media - it was the district level administration, those already familiar with the communities, that led the relief efforts. At the federal level, the devastating damage of the Gujarat earthquake in 2001 had resulted in a series of reforms that clarified roles and relationships between various actors. In addition, the government attributed their collaboration with the media as a key success factor. The media enabled them to pro-

vide updates to the affected communities, and also find out about problems from media reports. "They highlighted where the work was done, and where more work was needed," said one official. However, many acknowledged that even the relief effort in India fell short at many levels and that lessons learned from the Tsunami must be institutionalized for the next disaster. For example, "having a single point of control for all the supplies coming into the region and allocating supplies based on need should be the desired state for the next disaster," stated one official.

In Sri Lanka only 29% of the NGOs participating in the study felt the government's coordination role was 'very helpful' relative to 69% of their peers in India. The government was criticized in the media for being slow to react, failing to have clear guidelines and policies for relief work and not tackling the coordination role optimally (see Table 6).

#### **4. Relief Content and Process are Important**

An important lesson from this study of NGOs and affected families in the Tsunami is that both relief content (timing and adequacy) and relief process (distribution methods) are important to effective relief (see Table 3). We found that even when the relief content fell short, those affected indicated greater satisfaction if they perceived that their dignity was respected and they were handled with sensitivity. While most appreciated the food and clothing that came into the region, they were disconcerted by the different processes that were used to allocate the relief supplies. "There was no proper queue system in the beginning. We had a lot of fights..." said one person. "They gave supplies to people who belonged to their faith," reported another. Others described their inability to use the supplies that were given. "They were giving rice, but no vessels to cook." The study also uncovered instances where the most vulnerable in a community - the very old, the widows and the disabled - were marginalized as they were excluded from the distribution of relief supplies. Thus providers of aid must pay attention to cultural norms, equity in aid distribution, and methodologies for the distribution of aid.

#### **5. Back Room and Capacity Must Be Developed**

In a relief effort there is much more emphasis on the front-line provision of aid. Food, water, shelter and clothing are procured, and programs for relief are developed. However, equally important to the front line is the "back room," which ensures that the supply chains for relief have been appropriately planned and that there is transportation and storage for the supplies that are being mobilized. Visibility to the pipeline is important as is the ability to account for the outcomes intended.

During the Tsunami relief phase, most NGOs and government officials indicated adequate human resources in terms of volunteers to clear debris and facilitate distribution. What was lacking was technical expertise and back-room capability such as medical services, transportation and warehousing (see Table 4). In future relief efforts, significant attention must be paid to the procurement of these types of resources.

Table 1: Relief Services Received by Affected Families in the First 48 Hours

Relief Service	India (%)	Sri Lanka (%)
Rescue	48	31
ID of Dead	22	13
Cleaning Debris	15	8
Medical Services	66	33
Food	91	78
Drinking Water	85	70
Relocation	49	3
Bedding	40	26
Clothes	66	52
Infant Food	40	24
Counseling Services	20	6

India: 802 respondents

Sri Lanka: 604 respondents

Table 2: Affected Families' Recall About Relief Service Providers in the First 48 Hours

Agency	India (%)	Sri Lanka (%)
Government	86	4
Medical	59	23
Religious Groups	54	20
Political Party	45	8
NGOs/Private Sector	40	12
Army/Airforce/CoastGuard	20	39
Fire Rescue	16	1
International Organizations	9	14

India: 802 respondents

Sri Lanka: 604 respondents



Table 3: Affected Families Satisfaction with Timeliness of Aid Delivery and Appropriateness (Dignity) of the Relief Process

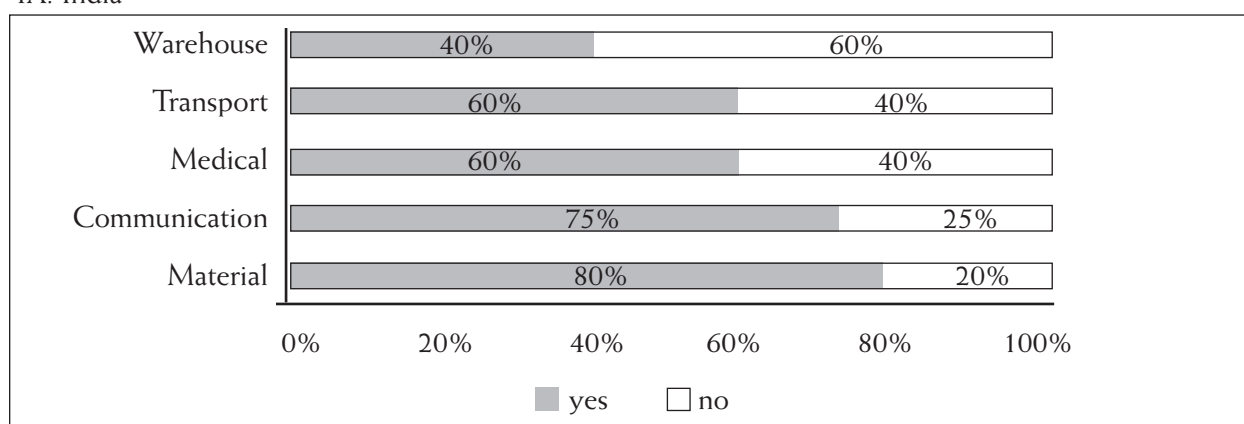
	India		Sri Lanka	
	Timely (%)	Dignity (%)	Timely (%)	Dignity (%)
Food	80	60	68	66
Bedding/Shelter	62	54	58	50
Medical Care	75	90	72	75
Clothes	90	45	70	67
Counseling	74	67	68	NA

India: 802 respondents

Sri Lanka: 604 respondents

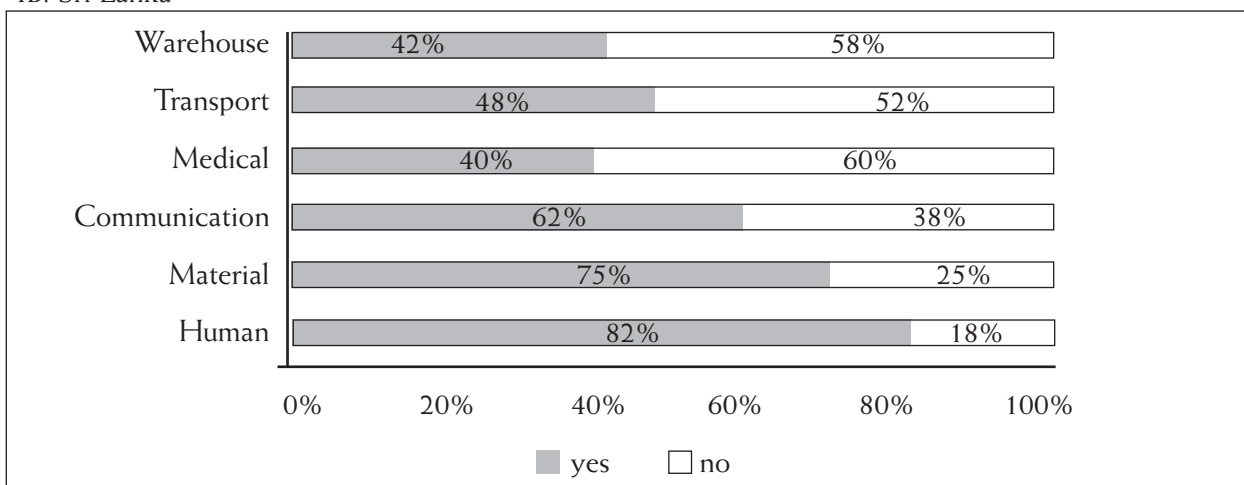
Table 4: NGO Responses About Resources Available for Relief

4A: India



Base: 226

4B: Sri Lanka



Base: 150

Table 5: Type of Organizations NGOs Collaborated with

5A: India

Type of Organization	%
Local NGOs	45
Government	36
International NGOs	11
Military/Police	5
Other Organizations (Religious/ Student Groups)	5

Base: 226

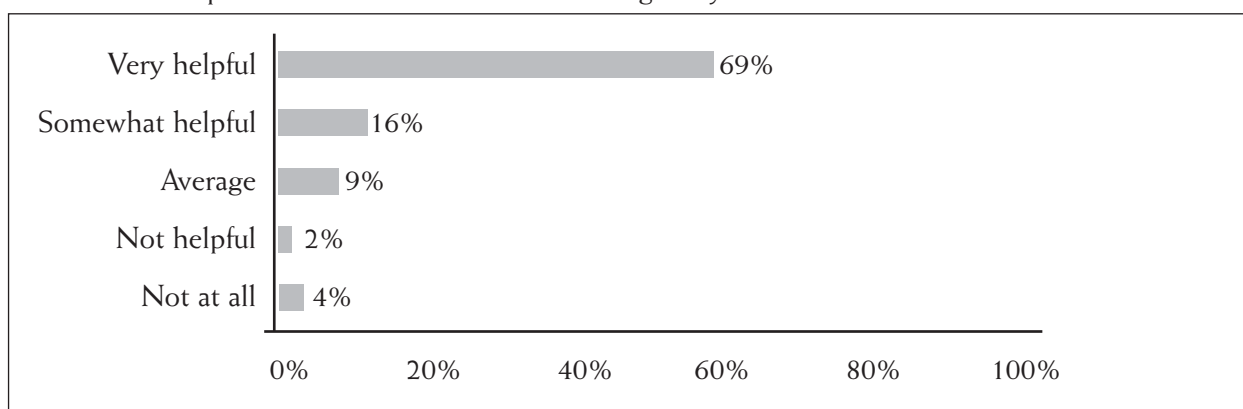
5B: Sri Lanka

Type of Organization	%
Local NGOs	41
Government	28
International NGOs	27
Military	1
Other Organizations (Donors, etc.)	25

Base: 150

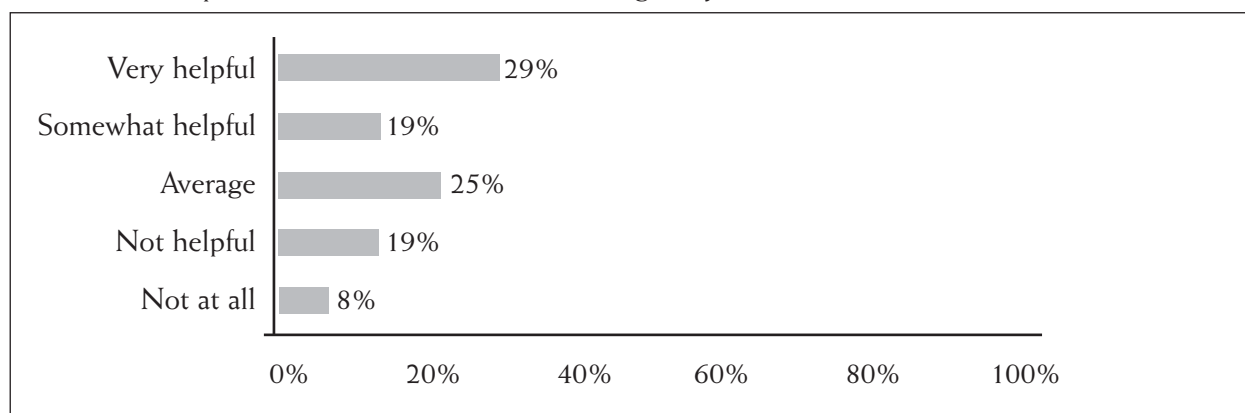
Table 6: Coordination by Government

6A: NGO Perceptions of Usefulness of Coordinating Body in India



Base: 226

6B: NGO Perceptions of Usefulness of Coordinating Body in Sri Lanka



Base: 150

Table 7: Top Ranked Relief Providers by Aid Recipients

7A: India

Type of Relief	Rank 1	Rank 2
Drinking Water	Government	Private Company
Cooked Food	Government	Private Company & Religious Groups
Dry Ration	Government	Local NGO, Private Company, Religious Group
Clothes	Government	Private Company
Toiletries	Private Company	Local NGO
Medical Supplies & Medical Care	Government	Private Company
Utensils, Stove, Fuel	Government	Private Company, Local NGO
Bedding & Bedsheets	Government	Private Company
Materials for Makeshift Shelter	Government	Local NGO
Milk/ Infant Food	Private	Government, Local NGO
Overall	Government	Private Company

7B: Sri Lanka

Type of Relief	Rank 1	Rank 2
Drinking Water	Local NGOs	Government, Int'l NGOs
Cooked Food	Government	Local NGOs, Int'l NGOs
Dry Ration	Individuals	Government
Clothes	Individuals	Local NGOs
Toiletries	Local NGOs	Int'l NGOs
Medical Supplies & Medical Care	Local NGOs	Government
Utensils, Stove, Fuel	Local NGOs	Int'l NGOs
Bedding & Bedsheets	Local NGOs	Int'l NGOs
Materials for Makeshift Shelter	Local NGOs	Int'l NGOs
Milk/ Infant Food	Local NGOs	Individuals
Overall	Local NGOs	Int'l NGOs

Table 8: NGO Sources of Funding

8A: India

Source	%
Central Government	3.36
State Government	11.62
International Bodies	32.85
Religious-Based Organizations	10.33
Non-Resident Individuals	7.66
Corporate/Business House	10.14
Others	24.04

Base: 226

8B: Sri Lanka

Source	%
Central Government	2
State Government	1.51
International Bodies	31.22
Religious-Based Organizations	3.32
Non-Resident Individuals	12.86
Corporate/ Business House	11.66
Others	37.43

Base: 150